



# Truro Golf Club Application for Membership

## TRURO GOLF CLUB

Full Membership  Affiliated  Intermediate  Social  *please tick box*

Personal Details:

Mr / Mrs / Miss / Ms ..... Address: .....

Surname ..... .....

Forenames ..... Postcode: ..... Tel No: .....

Date of Birth...../...../..... Email: .....

Home Tel No: ..... Mobile: .....

Current / Past Clubs ..... Date member from / to .....

WHS Handicap Index ..... CDH No. ....

I understand that for some categories of membership I will be required to attend an interview and if a beginner to the game, I may be required to have a course of lessons with the Club Professional.

If elected for Membership I undertake to observe and be bound by the Rules and Constitution of Truro Golf Club.

Signature of applicant: ..... Date: .....

I the undersigned Proposer are acquainted personally with the applicant and know of no reason for not recommending him/her for Membership of this Club. I understand that I am required to acquaint the applicant with The Rules of the Club, especially those concerning Golf Etiquette and Dress Code on and off the course. I will undertake to play the first two games of golf with him/her should the application be for any category of playing membership.

*N.B. The Proposer must be a Full Playing or Senior full Playing member of Truro Golf Club.*

Signature of Proposer's (If applicable) .....

Name of Proposer (f applicable) .....